

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Omar

First name

A.

Middle name

Shaker

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-2384

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years** I have not used any business name or EINs.Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live8771 Sunshine Court
Orland Park, IL 60462

Number, Street, City, State & ZIP Code

Cook

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years? No. Yes.

District _____ When _____ Case number _____
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No Yes.

Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____

11. Do you rent your residence? No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?** No. Go to Part 4. Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

 No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No. Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <p><input checked="" type="checkbox"/> No. Go to line 16b.</p> <p><input type="checkbox"/> Yes. Go to line 17.</p>		
	16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <p><input type="checkbox"/> No. Go to line 16c.</p> <p><input checked="" type="checkbox"/> Yes. Go to line 17.</p>		
	16c. State the type of debts you owe that are not consumer debts or business debts		
<hr/>			
17. Are you filing under Chapter 7?	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
<hr/>			
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Omar A. Shaker

Omar A. Shaker

Signature of Debtor 1

Signature of Debtor 2

Executed on September 26, 2018

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 Omar A. Shaker**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Robert R. Benjamin
Signature of Attorney for Debtor

Date

September 26, 2018
MM / DD / YYYY

Robert R. Benjamin

Printed name

Golan Christie Taglia LLP

Firm name

70 W. Madison

Suite 1500

Chicago, IL 60602

Number, Street, City, State & ZIP Code

Contact phone (312) 263-2300

Email address

rrbenjamin@gct.law

0170429 IL

Bar number & State

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 270,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 14,086.01
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 284,086.01

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 252,590.10
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 27,917.46
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 808,629.68
		Your total liabilities \$ 1,089,137.24

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 2,838.88
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 6,988.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?**

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ _____

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 27,917.46
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 27,917.46

Fill in this information to identify your case and this filing:

Debtor 1	Omar A. Shaker	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	
Case number		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1

8771 Sunshine Court

Street address, if available, or other description

Orland Park IL 60462-0000
 City State ZIP Code

Cook
 County

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$270,000.00	\$270,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
 (see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$270,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 Omar A. Shaker

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

 No Yes3.1 Make: Mercedes-Benz

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Model: GL450Year: 2007

Approximate mileage: _____

Other information: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$5,500.00

\$5,500.00

3.2 Make: Nissan

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Model: AltimaYear: 2003

Approximate mileage: _____

Other information: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$200.00

\$200.00

3.3 Make: Chevrolet

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Model: ImpalaYear: 2000

Approximate mileage: _____

Other information: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$300.00

\$300.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$6,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....

Household goods and furnishings

\$750.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No

Debtor 1 Omar A. Shaker

 Yes. Describe.....

Electronics	\$250.00
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8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....

Mossberg 500 shotgun	\$50.00
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XD-S Springfield pistol	\$100.00
-------------------------	----------

10/22 Takedown rifle	\$100.00
----------------------	----------

AR-15	\$250.00
-------	----------

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....

Clothes	\$150.00
---------	----------

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....

Silver wedding ring	\$100.00
---------------------	----------

13. Non-farm animals

Examples: Dogs, cats, birds, horses

 No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1,750.00

Debtor 1 Omar A. Shaker

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash

\$50.00

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking x9076 Bank of America \$25.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

Shaker Subs Elite Inc. 100% % \$0.00

Shaker Subs Elite Bolingbrook Inc. 100% % \$0.00

Shaker Subs Elite Burbank Inc. 100% % \$0.00

Shaker Subs Elite Munster Inc. 100% % \$0.00

Shaker Subs Elite Schererville Inc. 100% % \$0.00

Shaker Subs Elite Villa Park Inc. 100% % \$0.00

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

Debtor 1 Omar A. Shaker

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Brightstart - College Savings (1) \$1,647.31

Brightstart - College Savings (2) \$304.35

Brightstart - College Savings (3) \$304.35

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them...

Serve Safe Food Handler (IL) \$0.00

Serve Safe Manager Certificate (IL) \$0.00

Driver's License \$0.00

Money or property owed to you?**Current value of the portion you own?
Do not deduct secured claims or exemptions.****28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Total anticipated 2017 refund for jointly filed return (\$5,782.00)

Federal

\$2,891.00

Total anticipated 2017 refund for jointly filed return (\$1,124.00)	State	\$562.00
---	-------	----------

Total anticipated 2016 refund for jointly filed return (\$1,104.00)	Federal	\$552.00
---	---------	----------

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No
 Yes. Give specific information.....

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information..

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$6,336.01

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.

Debtor 1 Omar A. Shaker

 Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$270,000.00
56. Part 2: Total vehicles, line 5	\$6,000.00	
57. Part 3: Total personal and household items, line 15	\$1,750.00	
58. Part 4: Total financial assets, line 36	\$6,336.01	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
62. Total personal property. Add lines 56 through 61...	\$14,086.01	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$284,086.01

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS	
Case number (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
8771 Sunshine Court Orland Park, IL 60462 Cook County Line from <i>Schedule A/B</i> : 1.1	\$270,000.00	<input checked="" type="checkbox"/> \$15,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
2007 Mercedes-Benz GL450 Line from <i>Schedule A/B</i> : 3.1	\$5,500.00	<input checked="" type="checkbox"/> \$2,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
2007 Mercedes-Benz GL450 Line from <i>Schedule A/B</i> : 3.1	\$5,500.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
2003 Nissan Altima Line from <i>Schedule A/B</i> : 3.2	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
2000 Chevrolet Impala Line from <i>Schedule A/B</i> : 3.3	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Debtor 1 Omar A. Shaker

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Household goods and furnishings Line from Schedule A/B: 6.1	\$750.00	<input checked="" type="checkbox"/> \$750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Electronics Line from Schedule A/B: 7.1	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Mossberg 500 shotgun Line from Schedule A/B: 10.1	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
XD-S Springfield pistol Line from Schedule A/B: 10.2	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
10/22 Takedown rifle Line from Schedule A/B: 10.3	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
AR-15 Line from Schedule A/B: 10.4	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Clothes Line from Schedule A/B: 11.1	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Silver wedding ring Line from Schedule A/B: 12.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Cash Line from Schedule A/B: 16.1	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brightstart - College Savings (1) Line from Schedule A/B: 24.1	\$1,647.31	<input checked="" type="checkbox"/> \$1,647.31 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(j)
Brightstart - College Savings (2) Line from Schedule A/B: 24.2	\$304.35	<input checked="" type="checkbox"/> \$304.35 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(j)
Brightstart - College Savings (3) Line from Schedule A/B: 24.3	\$304.35	<input checked="" type="checkbox"/> \$304.35 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(j)

Debtor 1 Omar A. Shaker

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Federal: Total anticipated 2017 refund for jointly filed return (\$5,782.00) Line from <i>Schedule A/B</i> : 28.1	\$2,891.00	<input checked="" type="checkbox"/> \$950.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS	
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1 Cook County Treasurer	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name	8771 Sunshine Court Orland Park, IL 60462 Cook County	\$9,050.10	\$270,000.00	\$0.00

P.O. Box 805438
Chicago, IL 60680

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) 2017 real estate taxes, PIN 23-35-312-003-0000

Date debt was incurred

Last 4 digits of account number 0000

2.2 Cook County Treasurer	Describe the property that secures the claim:	\$6,033.00	\$270,000.00	\$0.00
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P.O. Box 805438
Chicago, IL 60680

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) 2018 Real Estate Tax estimate (Jan - Sept. 2018), PIN 23-35-312-003-0000

Date debt was incurred

Last 4 digits of account number 0000

Debtor 1 Omar A. Shaker

First Name

Middle Name

Last Name

Case number (if known)

2.3 PNC Bank
Creditor's Name

Describe the property that secures the claim:

2007 Mercedes-Benz GL450

\$1,342.00

\$5,500.00

\$0.00

2730 Liberty Avenue
Pittsburgh, PA 15222

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) Auto Loan

Date debt was incurred

Last 4 digits of account number 2824

2.4 SBA
Creditor's Name

9918 Hibert Street
San Diego, CA
92131-1018

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Describe the property that secures the claim:

8771 Sunshine Court Orland Park, IL
60462 Cook County

Unknown

\$270,000.00

Unknown

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) See U.S. Bank

Date debt was incurred

Last 4 digits of account number

2.5 U.S. Bank
Creditor's Name

P.O. Box 790401
Saint Louis, MO 63179

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Describe the property that secures the claim:

8771 Sunshine Court Orland Park, IL
60462 Cook County

\$236,165.00

\$270,000.00

\$0.00

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) Guaranty of corporate loan collateralized by home and corporate assets

Date debt was incurred 2015

Last 4 digits of account number 0126

Add the dollar value of your entries in Column A on this page. Write that number here:

\$252,590.10

Debtor 1 Omar A. Shaker

First Name

Middle Name

Last Name

Case number (if known)

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$252,590.10

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name, Number, Street, City, State & Zip Code
SBA
500 West Madison Street
Suite 1150
Chicago, IL 60661

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS	
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount		
2.1	Cook County Dept of Revenue Priority Creditor's Name 118 N. Clark Street Chicago, IL 60602 Number Street City State Zip Code	Last 4 digits of account number 0197	\$200.93	\$0.00	\$200.93
		When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply			
		<input type="checkbox"/> Contingent			
		<input checked="" type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input type="checkbox"/> Domestic support obligations			
		<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
		<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
		<input type="checkbox"/> Other. Specify Individual Use Tax			

Debtor 1 Omar A. Shaker

2.2	Illinois Department of Revenue Priority Creditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664 Number Street City State Zip Code	Last 4 digits of account number <u>3000</u> \$ <u>4,673.73</u> \$ <u>4,673.73</u> \$ <u>0.00</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Illinois Withholding Income Tax for Shaker Subs Elite Villa Park for the following periods: 6/2017, 9/2017, 12/2017, 3/2018, Account No. 81-5316313-000; secured \$1,394.00 UCC dated 7/11/18
2.3	Illinois Department of Revenue Priority Creditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664 Number Street City State Zip Code	Last 4 digits of account number <u>3000</u> \$ <u>6,119.00</u> \$ <u>6,119.00</u> \$ <u>0.00</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Illinois Withholding Income Tax for Shaker Subs Elite Bolingbrook, Inc., Account No. 81-5316313-000
2.4	Illinois Department of Revenue Priority Creditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664 Number Street City State Zip Code	Last 4 digits of account number <u>1845</u> \$ <u>7,052.86</u> \$ <u>7,052.86</u> \$ <u>0.00</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Tax for Shaker Subs Elite Bolingbrook, Inc. for 2018 Acct. #4242-1845 (ST-1), 4811047 (unemployment insurance)

Debtor 1 Omar A. Shaker

2.5	Indiana Department of Revenue Priority Creditor's Name Attention: Correspondence P.O. Box 595 Indianapolis, IN 46204 Number Street City State Zip Code	Last 4 digits of account number	\$237.00	\$237.00	\$0.00	
When was the debt incurred? _____						
As of the date you file, the claim is: Check all that apply						
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed						
Type of PRIORITY unsecured claim:						
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____						
State tax warrant for Shaker Subs Elite, Inc.						
2.6	Indiana Department of Revenue Priority Creditor's Name Attention: Correspondence P.O. Box 595 Indianapolis, IN 46204 Number Street City State Zip Code	Last 4 digits of account number	\$3,463.00	\$3,463.00	\$0.00	
When was the debt incurred? _____						
As of the date you file, the claim is: Check all that apply						
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed						
Type of PRIORITY unsecured claim:						
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____						
State tax warrant for Shaker Subs Elite, Inc.						
2.7	Indiana Department of Revenue Priority Creditor's Name PO Box 1028 Indianapolis, IN 46206-1028 Number Street City State Zip Code	Last 4 digits of account number	4001	\$554.36	\$554.36	\$0.00
When was the debt incurred? _____						
As of the date you file, the claim is: Check all that apply						
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed						
Type of PRIORITY unsecured claim:						
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____						
Indiana Withholding Income Tax for Shaker Subs Elite, Inc., Account No. 0163270384 - 001						

Debtor 1 Omar A. Shaker

2.8

Indiana Dept. Workforce Development Priority Creditor's Name 10 N. Senate Avenue SE 202 Indianapolis, IN 46204 Number Street City State Zip Code	Last 4 digits of account number <u>7997</u>	\$5,616.58	\$5,616.58	\$0.00
Who incurred the debt? Check one.	When was the debt incurred?			
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input checked="" type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply				
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>Taxes for Shaker Subs Elite Munster, Inc. for 4/2017, 5/2017, 1/2018; withholding tax 11/2017, 12/2017</u>				

2.9

Indiana Dept. Workforce Development Priority Creditor's Name 10 N. Senate Avenue SE 202 Indianapolis, IN 46204 Number Street City State Zip Code	Last 4 digits of account number <u>7987</u>	Unknown	\$0.00	\$0.00
Who incurred the debt? Check one.	When was the debt incurred?			
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input checked="" type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply				
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>Taxes for Shaker Subs Elite Schererville, Inc. for 2018</u>				

2.10

Penn Credit Priority Creditor's Name 916 S. 14th St. Harrisburg, PA 17108-0988 Number Street City State Zip Code	Last 4 digits of account number <u>0197</u>	Unknown	\$0.00	\$0.00
Who incurred the debt? Check one.	When was the debt incurred?			
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply				
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>Notice Only for creditor, Cook County Dept. of Revenue</u>				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

Debtor 1 Omar A. Shaker No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	<p>100 East Roosevelt Road, LLC Nonpriority Creditor's Name c/o Truemper, Titiner & Brouch, Ltd 1700 N. Farnsworth Avenue Aurora, IL 60505 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Guarantor of lease with Shaker Subs Elite Villa Park, Inc.</u></p>	\$10,796.00
4.2	<p>ACL Nonpriority Creditor's Name PO Box 27901 West Allis, WI 53227-0901 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7935</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u></p>	\$1,072.80

Debtor 1 Omar A. Shaker

4.3	<p>Advanced Disposal Nonpriority Creditor's Name Solid Waste Midwest, LLC - T8 PO Box 74008053 Chicago, IL 60674-8053 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Contingent Corporate Obligation</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8440</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Contingent Corporate Obligation</u></p>	<p>Unknown</p>
4.4	<p>American Express Nonpriority Creditor's Name Box 0001 Los Angeles, CA 90096-8000 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Goods and Services</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2007</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Goods and Services</u></p>	<p>\$605.51</p>
4.5	<p>Ashen/Faulkner Nonpriority Creditor's Name 217 N. Jefferson Street Suite 601 Chicago, IL 60661 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Claim arising from services rendered</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0000</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Claim arising from services rendered</u></p>	<p>\$206.25</p>

Debtor 1 Omar A. Shaker

4.6	Ashen/Faulkner Nonpriority Creditor's Name 217 N. Jefferson Street Suite 601 Chicago, IL 60661 Number Street City State Zip Code	Last 4 digits of account number <u>0002</u>	<u>\$485.80</u>
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim arising from services rendered</u>			
4.7	Ashen/Faulkner Nonpriority Creditor's Name 217 N. Jefferson Street Suite 601 Chicago, IL 60661 Number Street City State Zip Code	Last 4 digits of account number <u>0003</u>	<u>\$1,938.75</u>
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim arising from services rendered</u>			
4.8	Ashen/Faulkner Nonpriority Creditor's Name 217 N. Jefferson Street Suite 601 Chicago, IL 60661 Number Street City State Zip Code	Last 4 digits of account number <u>0004</u>	<u>\$1,993.75</u>
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim arising from services rendered</u>			

Debtor 1 Omar A. Shaker

4.9	<p>Bank of America Nonpriority Creditor's Name Business Card PO Box 15796 Wilmington, DE 19886-5796 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5520</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business credit card</u></p>	<p>\$456.50</p>
4.1	<p>Bank of America Nonpriority Creditor's Name 180 E. Roosevelt Road Villa Park, IL 60181 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7976</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Overdraft fee for corporation of Shaker Subs Elite Villa Park, Inc.</u></p>	<p>Unknown</p>
4.1	<p>Barclays Bank Delaware Nonpriority Creditor's Name Card Services P.O. Box 8801 Wilmington, DE 19899-8801 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2775</u></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Cash Advance</u></p>	<p>\$20,739.35</p>

Debtor 1 Omar A. Shaker4.1
2

Batzner Pest Control Inc.

Nonpriority Creditor's Name

Batzner Bed Bug Services, Inc.
16948 W. Victor Road
New Berlin, WI 53151

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5267

\$145.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.1
3

BillBusters

Nonpriority Creditor's Name

Ledford Wu and Borges, LLC
105 W. Madison, 23rd Floor
Chicago, IL 60602

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Legal Services

4.1
4

Blue Cross Blue Shield of Illinois

Nonpriority Creditor's Name

PO Box 650774
Dallas, TX 75265-0774

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

4295

\$3,456.16

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Health Insurance Premium

Debtor 1 Omar A. Shaker4.1
5

Brookwood, LLC

Nonpriority Creditor's Name

8424 Evergreen Lane

Darien, IL 60561

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

2017

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Alleged claim arising from corporate obligation for assignment of lease with Shaker Subs Elite

 Other. Specify Bolingbrook, Inc.4.1
6

Burbank Plaza Station LLC

Nonpriority Creditor's Name

P.O. Box 645414

Pittsburgh, PA 15264-5414

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

5216

\$71,571.38

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Guarantor of Corporate Obligation and Lease

 Other. Specify with Shaker Subs Elite Burbank, Inc.4.1
7

Capital One

Nonpriority Creditor's Name

P.O. Box 6492

Carol Stream, IL 60197-6492

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

1323

\$274.44

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Goods and Services

Debtor 1 Omar A. Shaker

Document

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Case number (if known)

4.1
8

Chase

Nonpriority Creditor's Name

PO Box 15298

Wilmington, DE 19850

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.1
9

Chase

Nonpriority Creditor's Name

PO Box 15298

Wilmington, DE 19850

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0564

\$1,500.00

When was the debt incurred?

2017

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Overdraft fees for checking account

4.2
0

Choice Subs Restaurants, LLC

Nonpriority Creditor's Name

2216 Hillsboro Lane

Naperville, IL 60564

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Claims arising from assignment of lease

Debtor 1 Omar A. Shaker4.2
1

Cintas #344

Nonpriority Creditor's Name

P O Box 88005
Chicago, IL 60680-1005

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

1073

\$228.69

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.2
2

Citi Cards

Nonpriority Creditor's Name

PO Box 9001016
Louisville, KY 40290-1016

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5678

\$2,649.07

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.2
3

CMJL, LLC

Nonpriority Creditor's Name

3005 Sable Oaks Road
Bloomington, IL 61704

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Claims arising from lease of Shaker Subs Elite
 Other. Specify Bolingbrook, Inc. or sale and lease agreement

Debtor 1 Omar A. Shaker

Document

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Case number (if known)

4.2
4

Comcast

Nonpriority Creditor's Name
P.O. Box 3001
Southeastern, PA 19398-3001

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

3502

\$415.48

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.2
5

ComEd

Nonpriority Creditor's Name
PO Box 6111
Carol Stream, IL 60197-6111

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9043

\$8,092.04

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.2
6

ComEd

Nonpriority Creditor's Name
PO Box 6111
Carol Stream, IL 60197-6111

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5149

\$4,789.81

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.2
7

ComEd

Nonpriority Creditor's Name

PO Box 6111

Carol Stream, IL 60197-6111

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5056

\$9,180.27

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.2
8

Comenity Bank/NY & Co

Nonpriority Creditor's Name

PO Box 182789

Columbus, OH 43218

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.2
9

Comenity Bank/Roomplace

Nonpriority Creditor's Name

PO Box 182789

Columbus, OH 43218

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

7329

\$3,120.02

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

Debtor 1 Omar A. Shaker4.3
0

Craig McCormick

Nonpriority Creditor's Name

3005 Sable Oaks Road
Bloomington, IL 61704

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Claims arising from lease of Shaker Subs Elite

 Other. Specify Bolingbrook, Inc. or sale and lease agreement4.3
1

Directv

Nonpriority Creditor's Name

PO Box 5006

Carol Stream, IL 60197-5006

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

2098

\$604.62

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Contingent Corporate Obligation4.3
2

Directv

Nonpriority Creditor's Name

PO Box 5006

Carol Stream, IL 60197-5006

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

8538

\$525.18

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.3
3

Directv	Last 4 digits of account number	3935	\$1,892.95
Nonpriority Creditor's Name PO Box 5006 Carol Stream, IL 60197-5006	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Contingent Corporate Obligation</u>		

4.3
4

Directv	Last 4 digits of account number	4898	\$343.02
Nonpriority Creditor's Name PO Box 5006 Carol Stream, IL 60197-5006	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Contingent Corporate Obligation</u>		

4.3
5

Directv	Last 4 digits of account number	1953	\$683.53
Nonpriority Creditor's Name PO Box 5006 Carol Stream, IL 60197-5006	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Contingent Corporate Obligation</u>		

Debtor 1 Omar A. Shaker4.3
6

Directv

Nonpriority Creditor's Name
PO Box 5006
Carol Stream, IL 60197-5006

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2864

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.3
7

Discover

Nonpriority Creditor's Name
PO Box 6103
Carol Stream, IL 60197-6103

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

3889

\$4,731.48

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.3
8

Do-It Restaurant Fulfillment, LLC

Nonpriority Creditor's Name
PO Box 86072
Minneapolis, MN 55486

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2955

\$188.56

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker

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Case number (if known)

4.3
9**eBay**

Nonpriority Creditor's Name

2145 Hamilton Avenue

San Jose, CA 95125

Number Street City State Zip Code

Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another **Check if this claim is for a community debt****Is the claim subject to offset?** No Yes**Last 4 digits of account number**

\$7.44

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:** Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Goods and Services4.4
0**Evergreen Park Development, LLC**

Nonpriority Creditor's Name

c/o Sterling Bay Companies

1040 W. Randolph St.

Chicago, IL 60607

Number Street City State Zip Code

Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another **Check if this claim is for a community debt****Is the claim subject to offset?** No Yes**Last 4 digits of account number**

\$15,617.00

When was the debt incurred?

2016

As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:** Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Alleged claim arising from corporate obligation
for lease with Shaker Subs Elite, Inc.4.4
1**FBCS Services**

Nonpriority Creditor's Name

330 S. Warminster Road

Suite 353

Hatboro, PA 19040

Number Street City State Zip Code

Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another **Check if this claim is for a community debt****Is the claim subject to offset?** No Yes**Last 4 digits of account number**

3502

\$0.00

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:** Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only, see Comcast

Debtor 1 Omar A. Shaker4.4
2**Fifth Third Bank**

Nonpriority Creditor's Name

8007 Calumet Avenue

Munster, IN 46321

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

1708

Unknown

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Overdraft fee for corporation of Shaker Subs Elite Munster, Inc.4.4
3**Firehouse of America, LLC**

Nonpriority Creditor's Name

3410 Kori Road

Jacksonville, FL 32257

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Last 4 digits of account number

Unknown

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Claims arising from franchises and guaranties
of amounts due for Shaker Subs Elite, Inc.
(SSE), SSE Bolingbrook, Inc., SSE Burbank,
Inc., SSE Munster, Inc., SSE Schererville, Inc.,
SSE Villa Park, Inc.**Other. Specify** Yes4.4
4**Hartford Fire Insurance Company**

Nonpriority Creditor's Name

3600 Wiseman Blvd.

San Antonio, TX 78251

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

9797

\$4,786.44

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify **Contingent Corporate Obligation**

Debtor 1 Omar A. Shaker4.4
5

Home Depot Credit Services

Nonpriority Creditor's Name

PO Box 78011

Phoenix, AZ 85062

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

1147

\$800.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.4
6

IL Dept of Healthcare and Family Se

Nonpriority Creditor's Name

Division of Child Support Services

PO Box 641097

Chicago, IL 60664-1097

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Contingent Corporate Obligation

 Other. Specify FIPS/Docket No. 1703100/2014D903344.4
7

Jack Michael, Inc.

Nonpriority Creditor's Name

9930 Clark Place

Crown Point, IN 46307

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Alleged claim arising from corporate obligation
for assignment of lease with Shaker Subs Elite
Schererville, Inc.

Debtor 1 Omar A. Shaker4.4
8**Joseph A. Larson**

Nonpriority Creditor's Name

3005 Sable Oaks Road

Bloomington, IL 61704

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

Unknown

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Claims arising from lease of Shaker Subs Elite
Other. Specify Bolingbrook, Inc. or sale and lease agreement4.4
9**MC-8201, LLC**

Nonpriority Creditor's Name

c/o Boyer Properties, Inc.

9901 Express Drive

Highland, IN 46322

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

Unknown

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Alleged claim arising from corporate obligation
for assignment of lease with Shaker Subs Elite
Other. Specify Munster Inc.4.5
0**Mood Media**

Nonpriority Creditor's Name

P.O. Box 71070

Charlotte, NC 28272-1070

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number 4284\$9,364.86**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker

Document

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Case number (if known)

4.5
1

Navient

Nonpriority Creditor's Name

P.O. Box 9533

Wilkes Barre, PA 18773-9533

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

1913

\$51,339.29

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Student Loans

4.5
2

Nicor Gas

Nonpriority Creditor's Name

P O Box 5407

Carol Stream, IL 60197-5407

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

6422

\$651.22

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.5
3

Nicor Gas

Nonpriority Creditor's Name

P O Box 5407

Carol Stream, IL 60197-5407

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0929

\$85.73

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.5
4**Nicor Gas**

Nonpriority Creditor's Name

P O Box 5407

Carol Stream, IL 60197-5407

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

7862

\$98.76

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

4.5
5**Nipsco**

Nonpriority Creditor's Name

P.O. Box 13013

Merrillville, IN 46411-3013

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

0052

\$5,989.51

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

4.5
6**Northern Insurance Group, Ltd.**

Nonpriority Creditor's Name

114 W. North Street

Morris, IL 60450

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

6837

\$0.00

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify See Society Insurance

Debtor 1 Omar A. Shaker4.5
7

Northstar Location Services, LLC

Nonpriority Creditor's Name

Attn: Financial Services Dept.
4285 Genesee Street
Cheektowaga, NY 14225-1943

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2775

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Notice Only, see Barclays Bank Delaware

4.5
8

PSB Enterprises, Inc.

Nonpriority Creditor's Name

5816 Wolf Road, Unit 1
Western Springs, IL 60558

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Claim for contribution arising from Shaker
Subs Elite Villa Park, Inc. lease4.5
9

RB Schererville Crossings, LLC

Nonpriority Creditor's Name

c/o Burke Costanza & Carberry
9191 Broadway
Merrillville, IN 46410

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$512,207.91

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

45D01-1712-PL-124

Claim arising from lease for Shaker Subs Elite
Schererville, Inc.

Debtor 1 Omar A. Shaker4.6
0

RB Schererville Crossings, LLC

Nonpriority Creditor's Name

c/o Regency Centers Corporation
One Independence Drive, Suite 114
Jacksonville, FL 32202-5019

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Notice Only to Lease Administration

Contingent Corporate Obligation arising from
lease for Shaker Subs Elite Schererville, Inc.4.6
1

RB Schererville Crossings, LLC

Nonpriority Creditor's Name

c/o Regency Centers Corporation
1211 W. 22nd St., Ste. 300
Oak Brook, IL 60523

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Notice Only to Property Management

Contingent Corporate Obligation arising from
lease for Shaker Subs Elite Schererville, Inc.

Debtor 1 Omar A. Shaker4.6
2

RB Schererville Crossings, LLC

Nonpriority Creditor's Name

c/o Regency Centers Corporation
One Independence Drive, Ste. 114
Jacksonville, FL 32202-5019

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Notice Only to Legal Department

Contingent Corporate Obligation arising from
lease for Shaker Subs Elite Schererville, Inc.4.6
3

Republic Services #719

Nonpriority Creditor's Name

PO Box 9001154

Louisville, KY 40290-1154

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

2968

\$129.96

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Contingent Corporate Obligation4.6
4

Republic Services #721

Nonpriority Creditor's Name

PO Box 9001154

Louisville, KY 40290-1154

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

4795

\$387.40

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.6
5

Retail Data Systems of Southeast

Nonpriority Creditor's Name

375 Franklin Gateway Suite 400
Marietta, GA 30067

Number Street City State Zip Code

Who incurred the debt? Check one.

 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

9802

\$1,212.13

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed

Type of NONPRIORITY unsecured claim:

 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Contingent Corporate Obligation4.6
6

Retail Technology Group

Nonpriority Creditor's Name

1663 Fenton Business Park Court
Fenton, MO 63026-2990

Number Street City State Zip Code

Who incurred the debt? Check one.

 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

\$715.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed

Type of NONPRIORITY unsecured claim:

 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Contingent Corporate Obligation4.6
7

Rubino Ruman Crosmer & Polen, LLC

Nonpriority Creditor's Name

Attorneys at Law
275 Joliet St., Ste. 330
Dyer, IN 46311

Number Street City State Zip Code

Who incurred the debt? Check one.

 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

000G

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed

Type of NONPRIORITY unsecured claim:

 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Attorney's Fees

Debtor 1 Omar A. Shaker4.6
8**S & D Coffee, Inc.**

Nonpriority Creditor's Name

300 Concord Pkwy South

PO Box 1628

Concord, NC 28027

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

6268

\$340.00

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.6
9**Sears Credit Cards**

Nonpriority Creditor's Name

PO Box 78051

Phoenix, AZ 85062-8051

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

4601

\$8,543.46

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Goods and Services

4.7
0**Society Insurance**

Nonpriority Creditor's Name

PO Box 1237

Fond Du Lac, WI 54936-1237

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

6837

\$9,964.00

When was the debt incurred?**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.7
1

Sonia Sandwiches, Inc.

Nonpriority Creditor's Name

285 Lorraine Circle

Bloomingdale, IL 60108

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Alleged claim arising from the sale to Shaker Subs Elite Munster, Inc. and Shaker Subs Elite

 Other. Specify Schererville, Inc.4.7
2

Synchrony Bank/Amazon

Nonpriority Creditor's Name

PO Box 960013

Orlando, FL 32896-0013

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

 Yes

Last 4 digits of account number

1598

\$640.98

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Goods and Services4.7
3

TCF Bank

Nonpriority Creditor's Name

7901 S. Harlem Avenue

Burbank, IL 60459

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

 Yes

Last 4 digits of account number

5843

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Overdraft fee for corporation of Shaker Subs Elite Burbank, Inc.

Debtor 1 Omar A. Shaker4.7
4

TLC Plumbing, Inc.

Nonpriority Creditor's Name

P.O. Box 429

Griffith, IN 46319

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

2017

\$85.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

4.7
5

Todd & Ann Scorza

Nonpriority Creditor's Name

2216 Hillsboro Lane

Naperville, IL 60564

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Claims for contribution arising Shaker Subs
Elite Bolingbrook, Inc. lease or sales
agreement

Other. Specify

4.7
6

Town of Munster

Nonpriority Creditor's Name

1005 Ridge Road

Munster, IN 46321

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

4602

\$191.80

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.7
7

Town of Schererville

Nonpriority Creditor's Name

Utilities Department

10 E. Joliet Street

Schererville, IN 46375-2011

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2602

\$192.70

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.7
8

U.S. Bank

Nonpriority Creditor's Name

2917 95th Street

Evergreen Park, IL 60805

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5926

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Overdraft fee for corporation of Shaker Subs Elite, Inc.

4.7
9

US Bank

Nonpriority Creditor's Name

P.O. Box 108

Saint Louis, MO 63166-0108

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9868

\$21,076.68

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Business credit card

Debtor 1 Omar A. Shaker4.8
0

US Bank

Nonpriority Creditor's Name
P.O. Box 108
Saint Louis, MO 63166-0108

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9610

\$7,072.62

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Business credit card

4.8
1

US Bank

Nonpriority Creditor's Name
PO Box 790408
Saint Louis, MO 63179

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5229

\$2,636.29

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Business credit card

4.8
2

Verizon

Nonpriority Creditor's Name
P.O. Box 25505
Lehigh Valley, PA 18002-5505

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0002

\$267.44

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.8
3

Verizon

Nonpriority Creditor's Name

P.O. Box 25505

Lehigh Valley, PA 18002-5505

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

0001

\$1,295.34

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

4.8
4

Village of Evergreen Park

Nonpriority Creditor's Name

Village Clerk's Office

9418 S. Kedzie Ave.

Evergreen Park, IL 60805

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

RE01

\$231.25

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify License Fee

4.8
5

Worldpay Us, Inc

Nonpriority Creditor's Name

201 17th Street, NW

Suite 1000

Atlanta, GA 30363

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

5954

\$13.06

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Contingent Corporate Obligation

Debtor 1 Omar A. Shaker4.8
6

Xtreme Environmental Solutions Inc.

Nonpriority Creditor's Name

P.O. Box 734

West Chicago, IL 60186

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

XE17

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Contingent Corporate Obligation

4.8
7

Yogesh Patel

Nonpriority Creditor's Name

285 Lorraine Circle

Bloomingdale, IL 60108

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Alleged claim arising from assignment of lease
 Other. Specify with MC-8201, LLC**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 27,917.46
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
6e. Total Priority. Add lines 6a through 6d.		6e. \$ 27,917.46
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00

Debtor 1 Omar A. Shaker6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.6i. 0.00
\$ 808,629.686j. **Total Nonpriority.** Add lines 6f through 6i.6j. \$ 808,629.68

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
	Name, Number, Street, City, State and ZIP Code			
2.1	Name			
	Number	Street		
	City	State	ZIP Code	
2.2	Name			
	Number	Street		
	City	State	ZIP Code	
2.3	Name			
	Number	Street		
	City	State	ZIP Code	
2.4	Name			
	Number	Street		
	City	State	ZIP Code	
2.5	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Ayah Shaker
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.19
 Schedule G _____
Chase

3.2 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.33
 Schedule G _____
Directv

3.3 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462
Co-obligor

Schedule D, line _____
 Schedule E/F, line 4.79
 Schedule G _____
US Bank

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.4 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.5 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.6 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.7 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.8 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.9 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.10 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.11 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.54
 Schedule G _____
Nicor Gas

Schedule D, line _____
 Schedule E/F, line 4.63
 Schedule G _____
Republic Services #719

Schedule D, line _____
 Schedule E/F, line 4.21
 Schedule G _____
Cintas #344

Schedule D, line _____
 Schedule E/F, line 2.3
 Schedule G _____
Illinois Department of Revenue

Schedule D, line _____
 Schedule E/F, line 4.15
 Schedule G _____
Brookwood, LLC

Schedule D, line _____
 Schedule E/F, line 4.20
 Schedule G _____
Choice Subs Restaurants, LLC

Schedule D, line _____
 Schedule E/F, line 4.75
 Schedule G _____
Todd & Ann Scorza

Schedule D, line _____
 Schedule E/F, line 4.23
 Schedule G _____
CMJL, LLC

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.12 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.13 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.14 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.15 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.16 Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.17 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.18 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.19 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.30
 Schedule G _____
Craig McCormick

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

Schedule D, line _____
 Schedule E/F, line 4.7
 Schedule G _____
Ashen/Faulkner

Schedule D, line _____
 Schedule E/F, line 4.48
 Schedule G _____
Joseph A. Larson

Schedule D, line _____
 Schedule E/F, line 2.4
 Schedule G _____
Illinois Department of Revenue

Schedule D, line _____
 Schedule E/F, line 4.31
 Schedule G _____
Directv

Schedule D, line _____
 Schedule E/F, line 4.52
 Schedule G _____
Nicor Gas

Schedule D, line _____
 Schedule E/F, line 4.25
 Schedule G _____
ComEd

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.20 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.68
 Schedule G _____
S & D Coffee, Inc.

3.21 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.64
 Schedule G _____
Republic Services #721

3.22 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.50
 Schedule G _____
Mood Media

3.23 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

3.24 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.16
 Schedule G _____
Burbank Plaza Station LLC

3.25 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.12
 Schedule G _____
Batzner Pest Control Inc.

3.26 Shaker Subs Elite Burbank Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.73
 Schedule G _____
TCF Bank

3.27 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652
Co-obligor

Schedule D, line _____
 Schedule E/F, line 4.80
 Schedule G _____
US Bank

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.28 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652
Co-obligor

3.29 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.30 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.31 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.32 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.33 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.34 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

3.35 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.81
 Schedule G _____
US Bank

Schedule D, line _____
 Schedule E/F, line 4.53
 Schedule G _____
Nicor Gas

Schedule D, line _____
 Schedule E/F, line 4.82
 Schedule G _____
Verizon

Schedule D, line _____
 Schedule E/F, line 4.83
 Schedule G _____
Verizon

Schedule D, line _____
 Schedule E/F, line 4.26
 Schedule G _____
ComEd

Schedule D, line 2.5
 Schedule E/F, line _____
 Schedule G _____
U.S. Bank

Schedule D, line 2.2
 Schedule E/F, line _____
 Schedule G _____
Cook County Treasurer

Schedule D, line 2.1
 Schedule E/F, line _____
 Schedule G _____
Cook County Treasurer

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.36 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

3.37 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.5
 Schedule G _____
Ashen/Faulkner

3.38 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.40
 Schedule G _____
Evergreen Park Development, LLC

3.39 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.84
 Schedule G _____
Village of Evergreen Park

3.40 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 2.7
 Schedule G _____
Indiana Department of Revenue

3.41 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.70
 Schedule G _____
Society Insurance

3.42 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.44
 Schedule G _____
Hartford Fire Insurance Company

3.43 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.36
 Schedule G _____
Directv

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.44 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.56
 Schedule G _____
Northern Insurance Group, Ltd.

3.45 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.38
 Schedule G _____
Do-It Restaurant Fulfillment, LLC

3.46 Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

Schedule D, line _____
 Schedule E/F, line 4.78
 Schedule G _____
U.S. Bank

3.47 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.35
 Schedule G _____
Directv

3.48 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.76
 Schedule G _____
Town of Munster

3.49 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.55
 Schedule G _____
Nipsco

3.50 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 2.8
 Schedule G _____
Indiana Dept. Workforce Development

3.51 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.87
 Schedule G _____
Yogesh Patel

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.52 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.53 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.54 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.55 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.56 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.57 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.58 Shaker Subs Elite Munster Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.59 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.49
 Schedule G _____
MC-8201, LLC

Schedule D, line _____
 Schedule E/F, line 4.71
 Schedule G _____
Sonia Sandwiches, Inc.

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

Schedule D, line _____
 Schedule E/F, line 4.8
 Schedule G _____
Ashen/Faulkner

Schedule D, line _____
 Schedule E/F, line 2.6
 Schedule G _____
Indiana Department of Revenue

Schedule D, line _____
 Schedule E/F, line 4.66
 Schedule G _____
Retail Technology Group

Schedule D, line _____
 Schedule E/F, line 4.42
 Schedule G _____
Fifth Third Bank

Schedule D, line _____
 Schedule E/F, line 4.34
 Schedule G _____
Directv

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.60 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.77
 Schedule G _____
Town of Schererville

3.61 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.59
 Schedule G _____
RB Schererville Crossings, LLC

3.62 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.71
 Schedule G _____
Sonia Sandwiches, Inc.

3.63 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

3.64 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.47
 Schedule G _____
Jack Michael, Inc.

3.65 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.87
 Schedule G _____
Yogesh Patel

3.66 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.8
 Schedule G _____
Ashen/Faulkner

3.67 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 2.5
 Schedule G _____
Indiana Department of Revenue

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.68 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.69 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.70 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.71 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.72 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.73 Shaker Subs Elite Schererville Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.74 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

3.75 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.61
 Schedule G _____
RB Schererville Crossings, LLC

Schedule D, line _____
 Schedule E/F, line 4.60
 Schedule G _____
RB Schererville Crossings, LLC

Schedule D, line _____
 Schedule E/F, line 4.62
 Schedule G _____
RB Schererville Crossings, LLC

Schedule D, line _____
 Schedule E/F, line 4.67
 Schedule G _____
Rubino Ruman Crosmer & Polen, LLC

Schedule D, line _____
 Schedule E/F, line 2.9
 Schedule G _____
Indiana Dept. Workforce Development

Schedule D, line _____
 Schedule E/F, line 4.74
 Schedule G _____
TLC Plumbing, Inc.

Schedule D, line _____
 Schedule E/F, line 4.86
 Schedule G _____
Xtreme Environmental Solutions Inc.

Schedule D, line _____
 Schedule E/F, line 4.3
 Schedule G _____
Advanced Disposal

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.76 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.85
 Schedule G _____
Worldpay Us, Inc

3.77 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.32
 Schedule G _____
Directv

3.78 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.27
 Schedule G _____
ComEd

3.79 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.65
 Schedule G _____
Retail Data Systems of Southeast

3.80 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.9
 Schedule G _____
Bank of America

3.81 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 2.2
 Schedule G _____
Illinois Department of Revenue

3.82 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.43
 Schedule G _____
Firehouse of America, LLC

3.83 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.6
 Schedule G _____
Ashen/Faulkner

Debtor 1 Omar A. Shaker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.84 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.1
 Schedule G _____
100 East Roosevelt Road, LLC

3.85 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.58
 Schedule G _____
PSB Enterprises, Inc.

3.86 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.46
 Schedule G _____
IL Dept of Healthcare and Family Se

3.87 Shaker Subs Elite Villa Park Inc.
8771 Sunshine Court
Orland Park, IL 60462

Schedule D, line _____
 Schedule E/F, line 4.10
 Schedule G _____
Bank of America

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS
Case number (if known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

	Debtor 1	Debtor 2 or non-filing spouse
<input checked="" type="checkbox"/> Employed	<input checked="" type="checkbox"/> Employed	
<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed	
Occupation	Owner	Sales Consultant
Employer's name	Shaker Subs Elite, Inc.	Sephora/Gymboree Group
Employer's address	8771 Sunshine Court Orland Park, IL 60462	71 Stevenson Street, Suite 2200 San Francisco, CA 94105

How long employed there? 3 years

2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
--------------	-----------------------------------

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 2,692.48	\$ 170.91
3. +\$ 0.00	+\$ 0.00
4. \$ 2,692.48	\$ 170.91

Debtor 1 Omar A. Shaker

Case number (if known) _____

Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse	
5. List all payroll deductions:	4. \$ 2,692.48	\$ 170.91	
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 24.51	
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00	
5e. Insurance	5e. \$ 0.00	\$ 0.00	
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00	
5g. Union dues	5g. \$ 0.00	\$ 0.00	
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ 0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 24.51	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,692.48	\$ 146.40	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00	
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00	
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00	
8e. Social Security	8e. \$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00	
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00	
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ 0.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ 0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,692.48	+ \$ 146.40	= \$ 2,838.88
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 2,838.88		
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.	<input checked="" type="checkbox"/> Yes.	Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents names.			Son	3	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes
			Son	5	

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 3,064.00

If not included in line 4:

4a. Real estate taxes	4a. \$ 792.00
4b. Property, homeowner's, or renter's insurance	4b. \$ 80.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$ 60.00
4d. Homeowner's association or condominium dues	4d. \$ 0.00
5. Additional mortgage payments for your residence, such as home equity loans	5. \$ 0.00

Debtor 1 Omar A. Shaker

Case number (if known) _____

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ <u>120.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>50.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>125.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>

7. Food and housekeeping supplies

8. Childcare and children's education costs	7. \$ <u>650.00</u>
---	---------------------

9. Clothing, laundry, and dry cleaning

10. Personal care products and services	8. \$ <u>100.00</u>
---	---------------------

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	9. \$ <u>135.00</u>
--	---------------------

13. Entertainment, clubs, recreation, newspapers, magazines, and books

14. Charitable contributions and religious donations	10. \$ <u>130.00</u>
--	----------------------

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>100.00</u>
15d. Other insurance. Specify: <u>Security System</u>	15d. \$ <u>25.00</u>

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____ 16. \$ 0.00

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$ <u>457.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: <u>Student Loan</u>	17c. \$ <u>500.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you. Specify: _____	18. \$ <u>0.00</u>
---	--------------------

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

21. Other: Specify: _____

\$ <u>6,988.00</u>
\$ _____
\$ <u>6,988.00</u>

22. Calculate your monthly expenses

22a. Add lines 4 through 21.
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
22c. Add line 22a and 22b. The result is your monthly expenses.

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>2,838.88</u>
23b. Copy your monthly expenses from line 22c above.	23b. \$ <u>6,988.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>-4,149.12</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____

Fill in this information to identify your case:			
Debtor 1	<u>Omar A. Shaker</u>		
	<u>First Name</u>	<u>Middle Name</u>	<u>Last Name</u>
Debtor 2 (Spouse if, filing)	<u>First Name</u>	<u>Middle Name</u>	<u>Last Name</u>
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	<u> </u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

■ No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Omar A. Shaker

Omar A. Shaker
Signature of Debtor 1

x

Signature of Debtor 2

Date September 26, 2018

Date

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

	Debtor 1	Debtor 2		
From January 1 of current year until the date you filed for bankruptcy:	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$16,154.90	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$52,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$8,432.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	Capital Gain (Or Loss)	\$28,043.00		
	Interest / Dividends	\$1,891.00		
For the calendar year before that: (January 1 to December 31, 2016)	Capital Gain (Or Loss)	\$10,244.00		
	Interest / Dividends	\$3,853.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. List all payments to an insider				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.				
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill in the details.				
Case title Case number	Nature of the case	Court or agency	Status of the case	
RB Schererville Crossings, LLC v. Shaker Subs Elite Schererville INC. d/b/a Shaker Subs Elite Inc. 45D01-1712-PL-124	Forcible Entry and Detainer	Lake County Superior Court 232 Russell Street Hammond, IN 46320	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
100 E. Roosevelt Road, LLC v. PSB Enterprises, Inc., Shaker Subs Elite Villa Park, Inc. d/b/a Firehouse Subs, Robert Kuhn, Pamela Kuhn, Omar Shaker, Ind. and d/b/a Shaker Subs Elite Villa Park, Inc. d/b/a Firehouse Subs and Unknown Occupants 2018 LM 002401	Forcible Entry and Detainer	18th Judicial Circuit Court 505 N. County Farm Road Room 2015 Wheaton, IL 60187	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.				
<input checked="" type="checkbox"/> No. Go to line 11. <input type="checkbox"/> Yes. Fill in the information below.				
Creditor Name and Address	Describe the Property	Date	Value of the property	
	Explain what happened			

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was taken

Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

**Gifts or contributions to charities that total more than \$600
Charity's Name**

Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed

Value

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

**Person Who Was Paid
Address**

Email or website address

Person Who Made the Payment, if Not You

Golan Christie Taglia LLP
70 W. Madison Street
Suite 1500
Chicago, IL 60602
Addelsalam Shaker, father

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

September 2018

\$3,000.00

Debtor 1 Omar A. Shaker

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Credit Card Management Services	Credit Counseling	September 2018	\$20.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
--------------------------------	---	-----------------------------------	-------------------

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Chase	XXXX-0564	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	December 2017	\$-1,500.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution
 Address (Number, Street, City, State and ZIP Code)

Who else had access to it?
 Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility
 Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?
 Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Owner's Name
 Address (Number, Street, City, State and ZIP Code)

Where is the property?
 (Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Name of site
 Address (Number, Street, City, State and ZIP Code)

Governmental unit
 Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Name of site
 Address (Number, Street, City, State and ZIP Code)

Governmental unit
 Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership

An officer, director, or managing executive of a corporation

An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN: From-To
Shaker Subs Elite Munster Inc. 8771 Sunshine Court Orland Park, IL 60462		2017 - 2018
Shaker Subs Elite Burbank Inc. 8771 Sunshine Court Orland Park, IL 60462		EIN: From-To 2016 - current
Shaker Subs Elite Bolingbrook Inc. 8771 Sunshine Court Orland Park, IL 60462		EIN: From-To 2017 - 2018
Shaker Subs Elite Inc. 4651 W. 79th St., Ste. 105 Chicago, IL 60652		EIN: From-To 2015 - current
Shaker Subs Elite Schererville Inc. 8771 Sunshine Court Orland Park, IL 60462		EIN: From-To 2017 - 2018
Shaker Subs Elite Villa Park Inc. 8771 Sunshine Court Orland Park, IL 60462		EIN: From-To 2016 - 2017

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

Debtor 1 Omar A. Shaker

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Omar A. Shaker

Omar A. Shaker

Signature of Debtor 1**Signature of Debtor 2**

Date September 26, 2018

Date

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Omar A. Shaker		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

Creditor's name: PNC Bank

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]: _____

No

Yes

Description of property securing debt: 2007 Mercedes-Benz GL450

Creditor's name: U.S. Bank

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]: _____

No

Yes

Description of property securing debt: 8771 Sunshine Court Orland Park, IL 60462 Cook County

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Debtor 1 Omar A. Shaker

Case number (if known) _____

Lessor's name:

No

Description of leased

Yes

Property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Omar A. Shaker

Omar A. Shaker

Signature of Debtor 1

X

Signature of Debtor 2

Date

September 26, 2018

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245	filings fee
\$75	administrative fee
<u>+</u>	<u>\$15</u> trustee surcharge
\$335 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	administrative fee
\$275 total fee	

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	administrative fee
\$310 total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court
Northern District of Illinois

In re Omar A. Shaker

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	3,000.00
Prior to the filing of this statement I have received	\$	3,000.00
Balance Due	\$	0.00

2. \$ 335.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify): Addelsalam Shaker, father

4. The source of compensation to be paid to me is:

Debtor Other (specify):

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 26, 2018

Date

/s/ Robert R. Benjamin

Robert R. Benjamin

Signature of Attorney

Golan Christie Taglia LLP

70 W. Madison

Suite 1500

Chicago, IL 60602

(312) 263-2300 Fax: (312) 263-0939

rrbenjamin@gct.law

Name of law firm

**United States Bankruptcy Court
Northern District of Illinois**

In re Omar A. Shaker

Debtor(s)

Case No.

Chapter 7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 190

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: September 26, 2018

/s/ Omar A. Shaker

Omar A. Shaker

Signature of Debtor

100 East Roosevelt Road, LLC
c/o Truemper, Titiner & Brouch, Ltd
1700 N. Farnsworth Avenue
Aurora, IL 60505

ACL
PO Box 27901
West Allis, WI 53227-0901

Advanced Disposal
Solid Waste Midwest, LLC - T8
PO Box 74008053
Chicago, IL 60674-8053

American Express
Box 0001
Los Angeles, CA 90096-8000

Ashen/Faulkner
217 N. Jefferson Street
Suite 601
Chicago, IL 60661

Ashen/Faulkner
217 N. Jefferson Street
Suite 601
Chicago, IL 60661

Ashen/Faulkner
217 N. Jefferson Street
Suite 601
Chicago, IL 60661

Ashen/Faulkner
217 N. Jefferson Street
Suite 601
Chicago, IL 60661

Ayah Shaker
8771 Sunshine Court
Orland Park, IL 60462

Bank of America
Business Card
PO Box 15796
Wilmington, DE 19886-5796

Bank of America
180 E. Roosevelt Road
Villa Park, IL 60181

Barclays Bank Delaware
Card Services
P.O. Box 8801
Wilmington, DE 19899-8801

Batzner Pest Control Inc.
Batzner Bed Bug Services, Inc.
16948 W. Victor Road
New Berlin, WI 53151

BillBusters
Ledford Wu and Borges, LLC
105 W. Madison, 23rd Floor
Chicago, IL 60602

Blue Cross Blue Shield of Illinois
PO Box 650774
Dallas, TX 75265-0774

Brookwood, LLC
8424 Evergreen Lane
Darien, IL 60561

Burbank Plaza Station LLC
P.O. Box 645414
Pittsburgh, PA 15264-5414

Capital One
P.O. Box 6492
Carol Stream, IL 60197-6492

Chase
PO Box 15298
Wilmington, DE 19850

Chase
PO Box 15298
Wilmington, DE 19850

Choice Subs Restaurants, LLC
2216 Hillsboro Lane
Naperville, IL 60564

Cintas #344
P O Box 88005
Chicago, IL 60680-1005

Citi Cards
PO Box 9001016
Louisville, KY 40290-1016

CMJL, LLC
3005 Sable Oaks Road
Bloomington, IL 61704

Comcast
P.O. Box 3001
Southeastern, PA 19398-3001

ComEd
PO Box 6111
Carol Stream, IL 60197-6111

ComEd
PO Box 6111
Carol Stream, IL 60197-6111

ComEd
PO Box 6111
Carol Stream, IL 60197-6111

Comenity Bank/NY & Co
PO Box 182789
Columbus, OH 43218

Comenity Bank/Roomplace
PO Box 182789
Columbus, OH 43218

Cook County Dept of Revenue
118 N. Clark Street
Chicago, IL 60602

Cook County Treasurer
P.O. Box 805438
Chicago, IL 60680

Cook County Treasurer
P.O. Box 805438
Chicago, IL 60680

Craig McCormick
3005 Sable Oaks Road
Bloomington, IL 61704

Directv
PO Box 5006
Carol Stream, IL 60197-5006

Discover
PO Box 6103
Carol Stream, IL 60197-6103

Do-It Restraurant Fulfillment, LLC
PO Box 86072
Minneapolis, MN 55486

eBay
2145 Hamilton Avenue
San Jose, CA 95125

Evergreen Park Development, LLC
c/o Sterling Bay Companies
1040 W. Randolph St.
Chicago, IL 60607

FBCS Services
330 S. Warminster Road
Suite 353
Hatboro, PA 19040

Fifth Third Bank
8007 Calumet Avenue
Munster, IN 46321

Firehouse of America, LLC
3410 Kori Road
Jacksonville, FL 32257

Hartford Fire Insurance Company
3600 Wiseman Blvd.
San Antonio, TX 78251

Home Depot Credit Services
PO Box 78011
Phoenix, AZ 85062

IL Dept of Healthcare and Family Se
Division of Child Support Services
PO Box 641097
Chicago, IL 60664-1097

Illinois Department of Revenue
Bankruptcy Section
PO Box 64338
Chicago, IL 60664

Illinois Department of Revenue
Bankruptcy Section
PO Box 64338
Chicago, IL 60664

Illinois Department of Revenue
Bankruptcy Section
PO Box 64338
Chicago, IL 60664

Indiana Department of Revenue
Attention: Correspondence
P.O. Box 595
Indianapolis, IN 46204

Indiana Department of Revenue
Attention: Correspondence
P.O. Box 595
Indianapolis, IN 46204

Indiana Department of Revenue
PO Box 1028
Indianapolis, IN 46206-1028

Indiana Dept. Workforce Development
10 N. Senate Avenue
SE 202
Indianapolis, IN 46204

Indiana Dept. Workforce Development
10 N. Senate Avenue
SE 202
Indianapolis, IN 46204

Jack Michael, Inc.
9930 Clark Place
Crown Point, IN 46307

Joseph A. Larson
3005 Sable Oaks Road
Bloomington, IL 61704

MC-8201, LLC
c/o Boyer Properties, Inc.
9901 Express Drive
Highland, IN 46322

Mood Media
P.O. Box 71070
Charlotte, NC 28272-1070

Navient
P.O. Box 9533
Wilkes Barre, PA 18773-9533

Nicor Gas
P O Box 5407
Carol Stream, IL 60197-5407

Nicor Gas
P O Box 5407
Carol Stream, IL 60197-5407

Nicor Gas
P O Box 5407
Carol Stream, IL 60197-5407

Nipsco
P.O. Box 13013
Merrillville, IN 46411-3013

Northern Insurance Group, Ltd.
114 W. North Street
Morris, IL 60450

Northstar Location Services, LLC
Attn: Financial Services Dept.
4285 Genesee Street
Cheektowaga, NY 14225-1943

Penn Credit
916 S. 14th St.
Harrisburg, PA 17108-0988

PNC Bank
2730 Liberty Avenue
Pittsburgh, PA 15222

PSB Enterprises, Inc.
5816 Wolf Road, Unit 1
Western Springs, IL 60558

RB Schererville Crossings, LLC
c/o Burke Costanza & Carberry
9191 Broadway
Merrillville, IN 46410

RB Schererville Crossings, LLC
c/o Regency Centers Corporation
One Independence Drive, Suite 114
Jacksonville, FL 32202-5019

RB Schererville Crossings, LLC
c/o Regency Centers Corporation
1211 W. 22nd St., Ste. 300
Oak Brook, IL 60523

RB Schererville Crossings, LLC
c/o Regency Centers Corporation
One Independence Drive, Ste. 114
Jacksonville, FL 32202-5019

Republic Services #719
PO Box 9001154
Louisville, KY 40290-1154

Republic Services #721
PO Box 9001154
Louisville, KY 40290-1154

Retail Data Systems of Southeast
375 Franklin Gateway Suite 400
Marietta, GA 30067

Retail Technology Group
1663 Fenton Business Park Court
Fenton, MO 63026-2990

Rubino Ruman Crosmer & Polen, LLC
Attorneys at Law
275 Joliet St., Ste. 330
Dyer, IN 46311

S & D Coffee, Inc.
300 Concord Pkwy South
PO Box 1628
Concord, NC 28027

SBA
9918 Hibert Street
San Diego, CA 92131-1018

SBA
500 West Madison Street
Suite 1150
Chicago, IL 60661

Sears Credit Cards
PO Box 78051
Phoenix, AZ 85062-8051

Shaker Subs Elite Bolingbrook Inc.
8771 Sunshine Court
Orland Park, IL 60462

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Shaker Subs Elite Inc.
4651 W. 79th St., Ste. 105
Chicago, IL 60652

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Orland Park, IL 60462

Society Insurance
PO Box 1237
Fond Du Lac, WI 54936-1237

Sonia Sandwiches, Inc.
285 Lorraine Circle
Bloomingdale, IL 60108

Synchrony Bank/Amazon
PO Box 960013
Orlando, FL 32896-0013

TCF Bank
7901 S. Harlem Avenue
Burbank, IL 60459

TLC Plumbing, Inc.
P.O. Box 429
Griffith, IN 46319

Todd & Ann Scorza
2216 Hillsboro Lane
Naperville, IL 60564

Town of Munster
1005 Ridge Road
Munster, IN 46321

Town of Schererville
Utilities Department
10 E. Joliet Street
Schererville, IN 46375-2011

U.S. Bank
P.O. Box 790401
Saint Louis, MO 63179

U.S. Bank
2917 95th Street
Evergreen Park, IL 60805

US Bank
P.O. Box 108
Saint Louis, MO 63166-0108

US Bank
P.O. Box 108
Saint Louis, MO 63166-0108

US Bank
PO Box 790408
Saint Louis, MO 63179

Verizon
P.O. Box 25505
Lehigh Valley, PA 18002-5505

Verizon
P.O. Box 25505
Lehigh Valley, PA 18002-5505

Village of Evergreen Park
Village Clerk's Office
9418 S. Kedzie Ave.
Evergreen Park, IL 60805

Worldpay Us, Inc
201 17th Street, NW
Suite 1000
Atlanta, GA 30363

Xtreme Environmental Solutions Inc.
P.O. Box 734
West Chicago, IL 60186

Yogesh Patel
285 Lorraine Circle
Bloomingdale, IL 60108